

SERIAL NUMBER 09/045,734	FILING DATE 03/20/1998	CLASS 600	GROUP A 3736	ATTORNEY DOCKET NO 2000SD
APPLICANT JOANNE SYLVIA LUCIANO, CAMBRIDGE, MASSACHUSETTS. **CONTINUING DOMESTIC DATA***** VERIFIED PROVISIONAL APPLICATION 60/041,287 03/21/1997 _____ **371 (NAT'L STAGE) DATA***** VERIFIED _____ **FOREIGN APPLICATIONS***** VERIFIED _____				
FOREIGN FILING LICENSE GRANTED 04/03/1998 ENTITY SMALL				
Foreign priority claimed <input type="radio"/> yes <input type="radio"/> no 35 USC 119 (a-d) conditions met <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> Met after Allowance Verified and acknowledged _____ <div style="text-align: right;">Examiner's Name Initials</div>	STATE OR COUNTRY MA	SHEETS DRAWINGS 21	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
ADDRESS SHARON L DAY 9 PLEASANT STREET SHARON , MA 02067				
TITLE METHOD FOR PREDICTING THE THERAPEUTIC OUTCOME OF A TREATMENT FOR AN AFFECTIVE DISORDER				
FILING FEE RECEIVED \$**395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="radio"/> All Fees <input type="radio"/> 1.16 Fees (Filing) <input type="radio"/> 1.17 Fees (Processing Ext. of Time) <input type="radio"/> 1.18 Fees (Issue) <input type="radio"/> Other _____ <input type="radio"/> Credit	